



PTO/SB/21 (09-04) (AW 10/2004)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/505,385
Filing Date	08/20/2004
First Named Inventor	Helmut Fennel et al.
Art Unit	2855
Examiner Name	Jermaine L. Jenkins
Attorney Docket No.	PC10375US

**ENCLOSURES (Check all that apply)**

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|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)  | <input type="checkbox"/> After Allowance Communication to TC   |
| <input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)          | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)                                    |
| <input type="checkbox"/> Express Abandonment Request   | <input type="checkbox"/> Petition to Convert to a Provisional Application                            | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address             | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> Terminal Disclaimer   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit card payment form; postcard receipt |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Request for Refund  |  |
|  | <input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD |  |

**Remarks:****SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm Name	RatnerPrestia		
Signature			
Printed Name	Glenn M. Massina		
Date	4/17/06	Registration No.	40,081

**CERTIFICATE OF TRANSMISSION / MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or Printed Name	Denise Morgan	Date	4/17/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL  
For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 200.00

**Complete if Known**

Application Number	10/505,385
Filing Date	08/20/2004
First Named Inventor	Helmut Fennel et al.
Examiner Name	Jermaine L. Jenkins
Art Unit	2855
Attorney Docket No.	PC10375US

**METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility		300		500		200	_____
Design		200		100		130	_____
Plant		200		300		160	_____
Reissue		300		500		600	_____
Provisional		200		0		0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
12	- 20 or HP =	x	=	<b>Fee (\$)</b> <b>Fee Paid (\$)</b>

HP = highest number of total claims paid for, if greater than 20

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
4	- 3 or HP =	1 x 200 =	200.00

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number)	x	_____ =

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

**Fees Paid (\$)****SUBMITTED BY****Complete (if applicable)**

Signature		Registration No. Attorney/Agent)	40,081	Telephone	610-407-0700
Name (Print/Type)	Glenn M. Massina	Date	4/17/06		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Appln. No.: 10/505,385  
Amendment Dated April 17, 2006  
Reply to Office Action of January 17, 2006

PC10375US



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No.: 10/505,385  
Applicant: Helmut Fennel et al.  
Filed: August 20, 2004  
Title: METHOD FOR COMPENSATING TEMPERATURE IN A TYRE PRESSURE MONITORING SYSTEM  
TC/A.U.: 2855  
Examiner: Jenkins, Jermaine L  
Confirmation No.: 7140  
Docket No.: PC10375US

**AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated January 17, 2006, please amend the above-identified application as follows:

- ☐ **Amendments to the Specification** begin on page \_\_\_\_\_ of this paper.
- ☒ **Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.
- ☐ **Amendments to the Drawings** begin on page \_\_\_\_\_ of this paper and include an attached replacement sheet(s).
- ☐ **Amendments to the Abstract** are on page \_\_\_\_\_ of this paper. A clean version of the Abstract is on page \_\_\_\_\_ of this paper.
- ☒ **Remarks/Arguments** begin on page 5 of this paper.

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